								- 1	Application or Docket Number					
	PATENT	RD	)					•						
Effective October 1, 2003								10.779692						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN			
TOTAL CLAIMS			7.6					RATE	F	Ē	]	RATE	FEE	
FOR .			NUMBER FILED		NUME	BER EXTRA	BASIĊ		EE 385	5.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7.6 minus 20=		•	6.		X\$ 9=			OR	X\$18=	301	
INDEPENDENT CLAIMS			minus 3 =		0			X43=		_	OR	X86=	·	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT			-145			·		OR	-290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							Į	TOTAL	-   -		OR	TOTAL	878	
CLAIMS AS AMENDED - PART II												OTHER		
Ŀ	18-00	(Column 1)		(Cólun		(Column 3)	mn 3) SMALL				OR	SMALL		
NTA		REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADI TIOI FE	NAL		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	. 25	Minus	-2	6	=0		X\$ 9=			OR	X\$18=	$\setminus$	
	Independent	. 2	Minus	(	3	-		X43=	ŀ		OR	X86=	V	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=	$\Lambda$	
	_	·.					L	TOTA	- 1		OR	TOTAL ADDIT, FEE		
1	900-	(Column 1)		(Colum	n 2)	(Column 3)		<b></b>	-				,	
AMENDMENT B		CLAIMS REMAINING AFTER		HIGHE NUME PREVIO	BER	PRESENT EXTRA		RATE	ADI			RATE	ADDI- TIONAL	
		AMENDMENT		PAID F		2,162	╽┟		FE	E_	ı		FEE	
	Total	•	Minus	**		#		X\$ 9=	·	_	OR	X\$18=		
AME	Ingependent	NITATION OF MI	Minus	ENDENT	CLAIM	•		X43=			OR	X86≖		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=		
										·	OR ,	TOTAL ADDIT. FEE	·	
		(Column 1)		(Colum		(Column 3)								
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOUS PAID F	ER USLY	PRESENT EXTRA		RATE	ADD TION FEE	AL		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		<b>.</b>		X\$ 9=		$\neg$	OR	X\$18=		
NE I	Independent	•	Minus	in		£	F	X43=	<del>                                     </del>	-		X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del> </del>		OR			
• 14	the entry in entire	L	+145=			OR	+290=							
1	the entry in colur the "Highest Nur	AC	TOTAL DDIT. FEE			OR A	. TOTAL DDIT. FEE							
		mber Previously Pa ber Previously Paid					foun	d in the a	ppropriati	e box	ın çokı	ımn 1,		